

Women Vote!

1120 Connecticut Ave NW

Ste 1100

Washington

DC

20036

FEC ID No. C00473918

☒ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Women Vote!			FEC IDENTIFICATION NUMBER C C00473918		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Mission Control Inc			Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0		
Mailing Address 114 A Mansfield Hollow Rd			Amount 10953.68		
City Mansfield Center	State CT	Zip Code 06250	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential		
Purpose of Expenditure Mailhouse		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: Ann McLane Kuster			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE-6189		

Full Name (Last, First, Middle, Initial) of Payee Mission Control Inc			Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0		
Mailing Address 114 A Mansfield Hollow Rd			Amount 10953.67		
City Mansfield Center	State CT	Zip Code 06250	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure Mailhouse		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: Carol Shea-Porter			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE-6186		

(a) SUBTOTAL of Itemized Independent Expenditures	21907.35
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Caroline Fines Signature	M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0